

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PA	70385	
O.I.P.E. CLASSIFIER		59	22800
FORMALITY REVIEW	WJ	7234	4-1-00
RESPONSE FORMALITY REVIEW	J	71531	1-12-01

# INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                      I ..... Interference  
 - (Through numeral)... Canceled        A ..... Appeal  
 + ..... Restricted                      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	12/12/00
2	✓	✓	12/12/00
3	✓	✓	12/12/00
4	✓	✓	12/12/00
5	✓	✓	12/12/00
6	✓	✓	12/12/00
7	✓	✓	12/12/00
8	✓	✓	12/12/00
9	✓	✓	12/12/00
10	✓	✓	12/12/00
11	✓	✓	12/12/00
12	✓	✓	12/12/00
13	✓	✓	12/12/00
14	✓	✓	12/12/00
15	✓	✓	12/12/00
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42	✓	✓	12/12/00
43	✓	✓	12/12/00
44	✓	✓	12/12/00
45	✓	✓	12/12/00
46	✓	✓	12/12/00
47	✓	✓	12/12/00
48	✓	✓	12/12/00
49	✓	✓	12/12/00
50	✓	✓	12/12/00

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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